

FROM McANDREWS, HELD, & MALLOY

(WED)11. 2' 05 15:49/ST. 15:49/NO. 4861050783 P 1



MCANDREWS, HELD & MALLOY
34TH FLOOR
500 WEST MADISON STREET
CHICAGO, ILLINOIS 60661

RECEIVED
CENTRAL FAX CENTER

NOV 02 2005

ARO PLEASE DELIVER RETURN RECEIPT TO
D. ZLATOPER

TELEPHONE: (312) 775-8000

FACSIMILE: (312) 775-8100

Certificate of Transmission under 37 CFR 1.8

CONFIDENTIAL

THE ENCLOSED MATERIAL IS INTENDED FOR THE RECIPIENT NAMED BELOW AND, UNLESS OTHERWISE EXPRESSLY INDICATED, IS CONFIDENTIAL AND PRIVILEGED INFORMATION. ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THE ENCLOSED MATERIALS IS PROHIBITED. IF YOU RECEIVE THIS TRANSMISSION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE, AT OUR EXPENSE, AND DESTROY THE ENCLOSED MATERIALS. YOUR COOPERATION IS APPRECIATED.

TO:	USPTO	FAX NO.:	571-273-8300
FROM:	McAndrews, Held & Malloy	USER ID:	8165
CLIENT:	2308	MATTER:	16967US01

Number of Pages This Transmission (Including Cover Page): 2

I hereby certify that the attached Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address is being facsimile transmitted to the United States Patent and Trademark Office on November 2, 2005.

A handwritten signature in dark ink, appearing to read 'Diane R. Zlatoper', written over a horizontal line.
Diane R. Zlatoper
U.S. Prosecution Paralegal

If you have problems receiving this facsimile transmission, please contact the sender at the above telephone number.

PTO/SB/82 (04-05)
Approved for use through 11/30/2005 OMB 0651-0035
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/715,874
	Filing Date	11/17/2000
	First Named Inventor	Carl M. Sullivan
	Art Unit	1774
	Examiner Name	Ferguson, Lawrence D.
	Attorney Docket Number	16967US01

RECEIVED
CENTRAL FAX CENTER
NOV 02 2005

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number : 23,446

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

23,446

OR

☐ Firm or
Individual Name

Address

City

State

ZIP

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Greg Gard, Sr. Vice-President, Technology & Innovation

Date

11/1/2005

Telephone

715-720-3139

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2